

<i>Index of Claims</i>		Application/Control No.	Applicant(s)/Patent Under Reexamination
		10045120	SYED, MAJID
		Examiner	Art Unit
		Myhre, James W	3622

<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal
<input type="checkbox"/> Allowed	<input type="checkbox"/> Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant			<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
CLAIM		DATE			
Final	Original	07/26/2007			
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4		✓			
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6		✓			
7		✓			
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36		-			

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CLAIM		DATE					
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